FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600004573 (9)

FEDERAL MARINE TERMINALS, INC.

Principal Place of Business

Mailing Address

FILED Apr 30 1998 8:00am Secretary of State



3434 E 95TH ST CHICAGO IL 60617		3434 E 95TH ST CHICAGO IL 60617		DO NOT WRITE IN THIS	SPACE		
					3. Date Incorporated or Qualified 09/06/1996		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied Fo	н	
21		26 660 E. Morthland Dr.		36-2550597	Not Applica		
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27 Suite D		5. Certificate of Status Desired Section Section 5. Section 5. Section 5. Certificate of Status Desired Section 5. Sectio		al .	
City & State		City & State	28 Valparaiso, IN		Election Campaign Financing Trust Fund Contribution	, , , , , , , , , , , , , , , , , , ,	
Zip	Country	Zip	Country		8. This corporation owes or has paid the cu	rrent year Intangible	
24	25		30		Personal Property Tax due June 30. Yes No		
	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New Registered	Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324					dress (P.O. Box Number is Not Acceptable)		
			83				
	: :		84	City	FI		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed or printed name of registered age	id and title if applicable (NOTE:	Rogistered Age	nt signature requ	sired when reinstating) DATE		
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	DC DELETE		1.1 TITLE			Change Add	Sition
NAME PATHY, LAURENCE G		UICCT MONTOFAL	1.2 NAME				
STREET ADDRESS	1000 DE LA GAUCHETIERE C	UESI, MUNIKEAL	1.3 STREET	ADDRESS			
CITY-ST-ZIP	QUEBEC, CANADA H3B 4W5		1.4 CITY-ST-ZIP				4141
TITLE	l Mila a la	☐ DELETE	2.1 TITLE			Change Add	JKKON
NAME	JONES, PETER G 1000 DE LA GAUCHETIERE C	HIEGT MONTDEAL	2.2 NAME				
STREET ADDRESS	QUEBEC, CANADA H3B 4W5	OEST, MONTHEAL	2.3 STREET ADDRESS				
CITY-ST-ZIP	VI	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE			Change Add	dition
TITLE	PEACOCK, JOHN J					CT Cutality CT vice	,,,,,,,,
NAME	1000 DE LA GAUCHETIERE OUEST, MONTREAL		3.2 NAME 3.3 STREET ADDRESS				
STREET ADDRESS	QUEBEC, CANADA H3B 4W5	veet, morring a					
CITY-ST-ZIP TITLE	D DELETE		3.4. CITY - ST - ZIP 4.1 TITLE			Change Add	dition
NAME	GARVIE, J B		4. 2 NAME				
STREET ADDRESS	4000 DE LA CALICHETIEDE OFFEET MONTDEM		4.3 STREET ADURESS				
CITY-ST-ZIP QUEBEC, CANADA H3B 4W5		•	4.4 CiTY-ST-ZIP				
TITLE	D	DELETE	5.1 TITLE	· -"		Change Add	dition
NAME	WINTER, T H		5.2 NAME				
STREET ADDRESS	1000 DE LA GAUCHETIERE C	UEST, MONTREAL	5.3 STREET	ADDRESS			
CITY-ST-ZIP	QUEBEC, CANADA H3B 4W5		5.4 CITY-ST-ZIP				
TITLE	D	DELETE	6.1 3/TLE			Change Add	dition
NAME	MURRAY, J S		6.2 NAME				
STREET ADDRESS	1000 DE LA GAUCHETIERE C	UEST, MONTREAL	6.3 STREET ADDRESS				
CITY-ST-ZIP	QUEBEC, CANADA H3B 4W5		6.4 CITY - S				
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed on on an attachment with an address.							